



KINGDOM OF CAMBODIA
Nation Religion King
ជាតិ ព្រះមហាក្សត្រ

ROYAL EMBASSY OF CAMBODIA
IN MOSCOW

Photograph
4 x 6

VISA APPLICATION FORM

Please fill it in duplicate with 2 photos and 1 copy of passport

Surname:		Present occupation:				
First name:		Place of residence:				
Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>						
Date of birth: Day.....Month.....Year..... Place of birth:.....		Fax/phone:				
Birth nationality:..... Present nationality:.....		Workplace:				
Passport or traveling document is valid for (country)		Purpose of visit				
Date of entry into Cambodia Day.....Month..... Year..... Date of departure (length of stay)		<input type="checkbox"/> Diplomatic <input type="checkbox"/> Tourist <input type="checkbox"/> Official <input type="checkbox"/> Business <input type="checkbox"/> Others (Please specify)				
Point of entry:		Point of exit:.....				
Means of transportation:.....		Means of transportation:.....				
Address during the visit:		Organization, Persons to be visited:				
Passport N ^o :.....		First trip to Cambodia <input type="checkbox"/> Yes				
Place of issue :.....		<input type="checkbox"/> No				
Date of Issue :.....		Traveling on group tour <input type="checkbox"/> Yes				
Date of Expiration :.....		<input type="checkbox"/> No				
Children under 12 years traveling with you	Surname	First name Patronymic	Sex M F		Date of birth	Permanent Address
Relatives in the Kingdom of Cambodia						

For official use

ថ្ងៃផ្តល់ :.....

ទិដ្ឋាការលេខ :.....

ប្រភេទ :.....

មុន្ន . ថ្ងៃទី.....ខែ.....ឆ្នាំ.....

ប្រធានការពារព្រឹទ្ធសភាពបណ្តុះបណ្តាលកម្មករក្រុងម៉ូស្គូ

I hereby declare that the information on this form is true and correct.

Moscow, (Date).....

(Signature of applicant)